

Provider Communication

Subject: Update – Policy/Procedure Part II Revisions for COS 960 and 840	Priority: High
Date: July 25, 2005	Message ID: ACSBNR07252005_2

Dear Providers,

The Department of Community Health, Division of Medical Assistance, is in the process of making revisions to Part II, Policies and Procedures for the following categories of service.

Effective July 17, 2005

The “HA” modifier will identify COS 840 (CIS) procedures. The “TM” modifier will identify COS 960 (CISS) procedures.

To properly identify services in cases where therapy procedure codes are shared within the individual programs, the following modifiers must be used to uniquely identify the therapy service being rendered. These modifiers should be submitted along with the “HA” or “TM” modifier.

Modifier “GP” (Physical Therapy)

Modifier “GO” (Occupational Therapy)

Modifier “GN” (Speech Therapy)

Modifier “UC” (Audiology)

The modifiers identified above along with the HA modifier are "only to be used with the shared codes"; however, ALL 840 codes must have the HA modifier.

Example COS 840: Procedure Code 97113 is shared by OT and PT. To identify PT service, modifiers “GP HA” should be submitted with the procedure code. To identify OT service, modifiers “GO HA” should be submitted)

Example COS 960: Procedure Code 97113 is shared by OT and PT. To identify PT service, modifiers “GP TM” should be submitted with the procedure code. To identify OT service, modifiers “GO TM” should be submitted.)

In order to allow providers to re-submit claims with previously denied line items for exceptions 6101 ‘Exact Duplicate’ and 6025 ‘Suspect Duplicate Claim for Professional File’, and not receive denials resulting in timely filing penalties, a mass adjustment will be initiated for claims matching the following criteria:

1. Claims in a paid and denied between 4/01/2003 through 07/16/2005
2. Claims for COS equal to 840 or 960
3. Where the claim line item is denied with one of the following exception codes :

6101 ‘Exact Duplicate’

6025 ‘Suspect Duplicate Claim for Professional File’

Based on the above criteria, the universe to be reprocessed equates to approximately 186,361 claims. ACS will initiate reprocessing on July 25, 2005 with an estimated completion date of August 29, 2005.



Reprocessing Schedule:

Reprocessing Date	Paid Dates to be Reprocessed
July 25, 2005	March 2005 through July 2005
August 1, 2005	December 2004 through March 2005
August 8, 2005	July 2004 through November 2004
August 15, 2005	February 2004 through June 2004
August 22, 2005	September 2003 through January 2004
August 29, 2005	April 2003 through August 2003

Claim line items meeting the criteria indicated above will deny for exception code 4353 - 'COS Not Valid For the Service'. Claim should be re-submitted with the appropriate modifiers for the COS and procedure code combination.

If you have any questions regarding these upcoming changes or additional information is needed, please contact the appropriate Policy Specialist listed below:

COS 840 (Children's Intervention Services) Sherri Collins (404) 463-6096

COS 960 (Children's Intervention School Services) Micole Atkins (404) 657-7180

Thank you for your continued participation in the Georgia Medicaid and PeachCare for Kids Programs.

Sincerely,

Department of Community Health